



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E371122**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

TRIBAL RESERVATION

CASE #	14-02767		
LOCAL AGENCY CODING	0664		
TOTAL # OF UNITS	02	OBJECT STRUCK	

DATE OF COLLISION	11	03	2014	TIME (2400)	1432	COUNTY #	31	MILES	N	E	IN	OF	0664
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ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input checked="" type="checkbox"/>	NON-INTERSECTION <input type="checkbox"/>
8 ST NE	BLOCK NO. <input checked="" type="checkbox"/>	12300
	MILE POST	

DISTANCE		MILES	N	E	W	OF (REFERENCE OR CROSS STREET)	E LAKESHORE DR
		FEET	S				

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	D: 4259036959
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LAST NAME	ASPREY	FIRST NAME	AMELIA	MIDDLE INITIAL	
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STREET NEW ADDRESS	828 131ST AVE NE
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CITY	LAKE STEVENS	ST	WA	ZIP	982589740
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #	ASPREA*023NJ	STATE	WA	SEX	F	D.O.B. MMDDYYYY	08	11	1998
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 2	RESTR. 4	EJECT 1	HELMET USE	INJURY CLASS 1	NATURE OF INJURIES
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LICENSE PLATE #	ACS4890	STATE	WA	VIN#	YV1AX8847E1031263
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	1984	MAKE	VOLV	MODEL	2444D	STYLE	4D	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. **WILLIAM ASPREY 828 131ST AVE NE LAKE STEVENS WA 98258**

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	SAFECO INSURANCE H2069061
VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	CITATION #	CHARGE



UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	D: 4253284422
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LAST NAME	MCGLOTHERN	FIRST NAME	CHLOE	MIDDLE INITIAL	M
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STREET NEW ADDRESS	2030 VALLEY VIEW DR
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CITY	LAKE STEVENS	ST	WA	ZIP	982584508
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CDL		RESTRICTIONS	B	ENDORSEMENTS	
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DRIVER'S LICENSE #	MCGLOCM034LS	STATE	WA	SEX	F	D.O.B. MMDDYYYY	06	10	1997
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 2	RESTR. 4	EJECT 1	HELMET USE	INJURY CLASS 1	NATURE OF INJURIES
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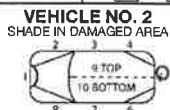
LICENSE PLATE #	ARU3781	STATE	WA	VIN#	5NMSH13E67H068893
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2007	MAKE	HYUN	MODEL	SANTAFE	STYLE	UT	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. **ANGELA MCGLOTHERN 2030 VALLEY VIEW DR LAKE STEVENS WA 98258**

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	LIBERTY MUTUAL A02-268-089128-40 49
VEHICLE LEGALLY STANDING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE



OFFICER'S NAME (PRINT)	KERRY BERNHARD	BADGE OR ID #	120	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E371122**

CASE # **14-02767**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		LECOINTE JORDAN C																	
ADDRESS & PHONE #		509 125 AVE NE LAKE STEVENS WA 98258 4253197140										SEX	F	D.O.B. MMDDYYYY	08	-	31	-	1998
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	1	SEAT POS.	3	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)		PERSON CHRISTINA C																	
ADDRESS & PHONE #		707 123 AVE NE LAKE STEVENS WA 98258 3604733001										SEX	U	D.O.B. MMDDYYYY	07	-	26	-	1983
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #												SEX		D.O.B. MMDDYYYY		-		-	
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	

NARRATIVE

On 11/3/2014 at approximately 1432 hours, the driver of Unit 2 was stopped at the stop sign at E Lakeshore DR on 8th St NE in the City of Lake Stevens. Unit 1 was travelling westbound on 8th ST NE behind Unit 2. The driver of Unit 1 was unable to stop and collided with the back of Unit 2 causing damage. The stop sign is located at the bottom of a steep grade. At the time of the accident the roads were wet and it was actively raining. Witnesses stated the driver of Unit 1 was looking down at the time of the collision. The driver of Unit 1 stated she looked down because when she applied the brakes the vehicle did not stop and she was looking at her feet to confirm she was pressing down on the brake pedal.

No injuries were reported and both vehicle's were able to be driven from the scene.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

KERRY BERNHARD

11-04-14 10:55 AM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

BOB SUMMERS 079

DATE

11/4/2014 10:44:08 PM

BADGE OR ID # **120**

ORI #

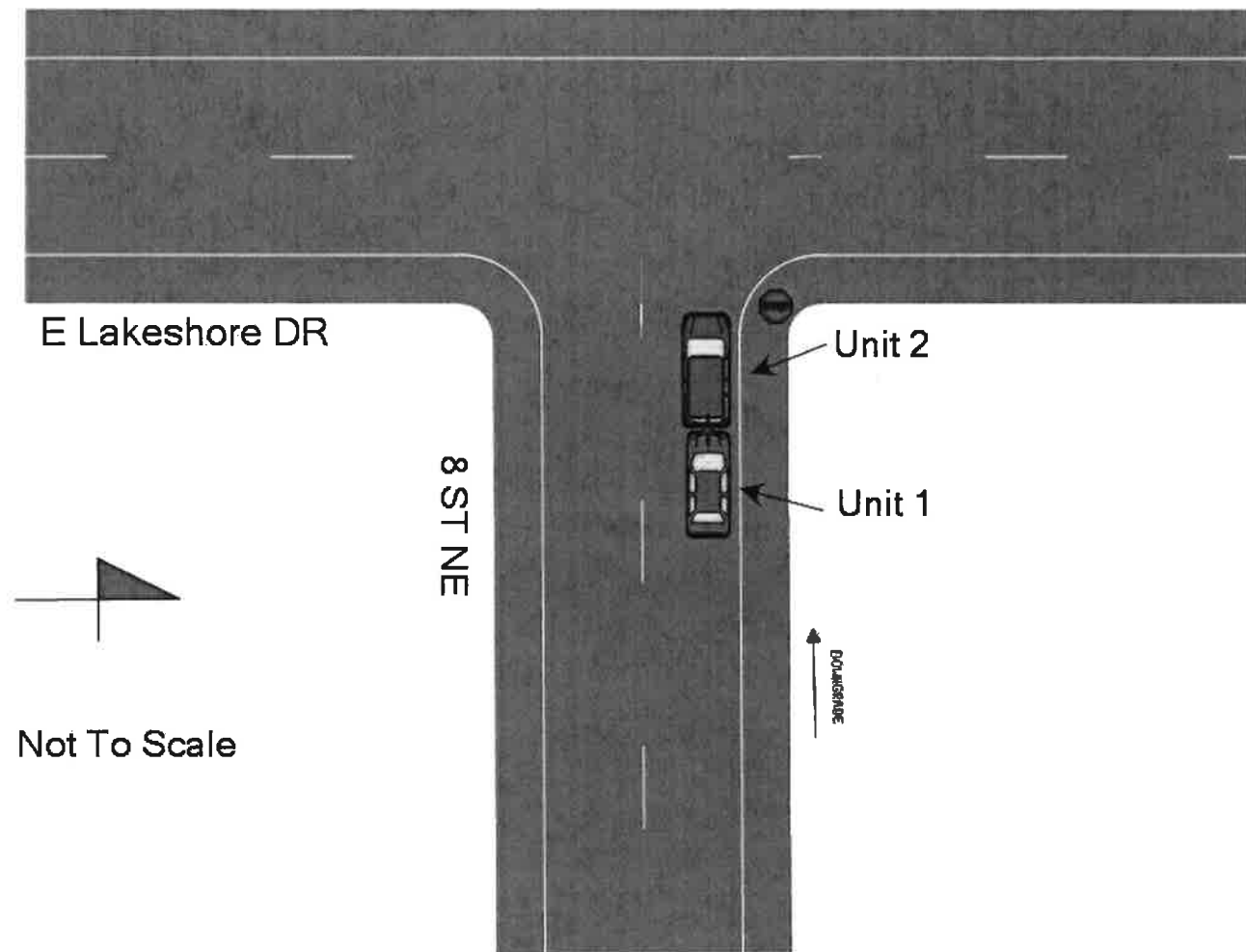
WA0311900

TIME POLICE DISPATCHED

2:32 PM

TIME POLICE ARRIVED

2:35 PM



Incident History for: #SS14021884

Case Numbers: \$SS14002767

Entered 11/03/14 14:32:12 BY SPCT08 SP0390

Dispatched 11/03/14 14:32:54 BY SPDP17 SP0100

Enroute 11/03/14 14:32:58

Onscene 11/03/14 14:35:35

Closed 11/03/14 15:00:58

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 2 Dispo: H

Police BLK: SS001 Fire BLK: AG1520 Map Page: 377H-7 Group: SS1 Beat: NORT

Src: T

Loc: 8 ST NE/E LAKESHORE DR , LKS (V)

Loc Info: ON LAKESHORE

Name: PERSON, CHRISTINA

Addr:

Phone: 3604733001

/1432 (SP0390) ENTRY , CC, NON INJ, BLKING , VEH1/ GRY HYNDAL, VEH/ TA
N VOLVO , TRYING TO PULL VEHS OFF TO SIDE OF RD
/1432 (SP0100) AGCADV , BOLO
/1432 DISP 19D3 #SS120 BERNHARD, OFFICER (KERRY)
/1432 ASSTER 19D1 #SS132 KILROY, OFFICER (JOSH)
#SS75 CHRISTENSEN, OFCR (CHAD)
/1435 ONSCNE 19D3
/1436 (SS132) REMINQ 19D1 MDTVEH, ARF4076, , WA, , , , , , , , , ,
/1441 (SP0100) ONSCNE 19D1
/1442 CLEAR 19D1
/1448 (SS120) *ASNCAS 19D3 \$SS14002767
/1453 REMINQ 19D3 MDTWANT, , , , , , WA, MCGLOCM034LS, , , , , , , , , ,
/1453 REMINQ 19D3 MDTWANT, , , , , , WA, ASPREA023NJ, , , , , , , , , ,
/1455 (*****) REMINQ 19D3 ACS4890
/1455 (SP0380) REMINQ 19D3 LIC, 19D3, ACS4890, , ,
/1455 (*****) REMINQ 19D3 ARU3781
/1455 (SP0380) REMINQ 19D3 LIC, 19D3, ARU3781, , ,
/1500 CLEAR 19D3 D/H
/1500 CLOSE 19D3

LSPD
ORIGINAL